EMPLOYER MUNICIPAL WITHHOLDING BOOKLET

INSTRUCTIONS FOR PREPARING AND FILING FORM WH

Who Must File:

Any employer within or doing business within the City of Heath, Ohio who employs one or more persons is required to withhold the tax of (1.50%) from all compensation paid, accrued or set apart to the employee, and to file Form WH and remit tax to the Heath Income Tax Bureau.

Deposit Requirements:

Quarterly - If tax withheld or required to be withheld is less than \$100 per month, remittance is due by the last day of the month following the end of a quarterly period.

Monthly - If more than \$100 is withheld or required to be withheld, remittance is due by the last day of the following month. Any employer within the City of Heath on a temporary basis (1 year or less) is also required to remit withholding deposits monthly.

Failure to File Return and Pay Tax:

All taxes, including taxes withheld or required to be withheld from wages by an employer, and remaining unpaid after they become due shall bear interest on the amount of the unpaid tax at the rate of one and one half percent (1.5%) per month (or fractional part thereof) and a late payment penalty of five percent (5.0%) per month (or fractional part thereof) to a

maximum of 100% of the tax due. The failure to receive a withholding deposit form shall not excuse an employer from making a return and depositing the taxes withheld.

How to Prepare This Form:

Line 1 - Enter qualifying wages as defined in O.R.C. 718.03, paid to all employees subject to Heath City tax during the period for which the return is made.

Line 2 - Enter actual tax withheld or required to be withheld during the period for which the return is made and indicate percentage rate used.

Line 3 - Adjust current payment of actual tax withheld for under payment or over payment in previous period. Attach explanation if necessary.

Line 4 & 5 - See instructions under Failure to File Return and Pay Tax.

Line 6 - Enter total amount to be remitted.

NOTE: FOR COMPLETE DETAILS OF EMPLOYER REQUIREMENTS YOU MAY REQUEST A COPY OF THE TAX ORDINANCE FOR THE CITY OF HEATH.

CITY OF HEATH, OHIO, EMPLOYER'S RETURN OF TAX WITHHELD

☐ AMENDED

(Signed) _

RETURN WITH PAYMENT

1.	Taxable Earnings paid all Employees subject		DO NOT ROUND
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	1.	\$
	If yes, attach explanation		
2.	Actual Tax Withheld in month/quarter for City	2.	\$
	Income Tax 1.50%25% Both		
3.	Adjustment of Tax for prior quarter (see instructions)	3.	\$
4.	Penalty (5% per month – max 100%)	4.	\$
5.	Interest (1.5% per month)	5.	\$
6.	Total – (Lines 2-5)	6.	\$

NAME AND ADDRESS

FOR THE PERIOD ENDING **JANUARY 31, 2011**

DUE ON OR BEFORE FEBRUARY 28, 2011

_____ Date __ (Official Title) ___ Federal ID no. _ Phone no. -THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW

I hereby certify that the information and statements

contained herein are true and correct.

MAKE CHECK OR MONEY ORDER PAYABLE TO

CITY OF HEATH MAIL TO:

INCOME TAX BUREAU

CITY OF HEATH 1287 HEBRON RD.

HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427

CI.	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TA	X WITHHELD A	AMENDED RETURN WITH PAYMEN
1.	Taxable Earnings paid all Employees subject	DO NOT ROUND	I hereby certify that the information and statements
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax		contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO 1	. \$	(Signed)
	If yes, attach explanation	. Ψ	(Official Title) Date
2.	Actual Tax Withheld in month/quarter for City	. \$	Federal ID no.
	Income Tax 1.50%25% Both		Phone no
3.	Adjustment of Tax for prior quarter (see instructions) 3		THIS RETURN MUST BE FILED ON OR
1.	Penalty (5% per month – max 100%) 4		BEFORE THE DUE DATE SHOWN BELOW
5.	Interest (1.5% per month) 5	\$	MAKE CHECK OR MONEY ORDER PAYABLE TO
ò.	Total – (Lines 2-5)	5. \$	CITY OF HEATH
NAM	ME AND ADDRESS	FOR THE PERIOD ENDING FEBRUARY 28, 2011 DUE ON OR BEFORE MARCH 31, 2011	MAIL TO: INCOME TAX BUREAU CITY OF HEATH 1287 HEBRON RD. HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427
	ify the Income Tax Bureau promptly of any change in ownership or name RM WH-M	and address shown above.	If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.
CI	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TA	X WITHHELD	AMENDED RETURN WITH PAYMEN
1.	Taxable Earnings paid all Employees subject	DO NOT ROUND	I hereby certify that the information and statements
-	to City of HEATH, Ohio, 1.50% (.0150) Income Tax		contained herein are true and correct.
	ls this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO 1	. \$	(Signed)
	If yes, attach explanation		(Official Title) Date
	Actual Tax Withheld in month/quarter for City	. \$	Federal ID no.
	Income Tax 1.50%25% Both		Phone no
3.	Adjustment of Tax for prior quarter (see instructions)		THIS RETURN MUST BE FILED ON OR
	Penalty (5% per month – max 100%) 4		BEFORE THE DUE DATE SHOWN BELOW
).	Interest (1.5% per month) 5		MAKE CHECK OR MONEY ORDER PAYABLE TO
	Total – (Lines 2-5)	5. \$	CITY OF HEATH
IAN	ME AND ADDRESS	FOR THE PERIOD ENDING MARCH 31, 2011	MAIL TO: INCOME TAX BUREAU CITY OF HEATH
		DUE ON OR BEFORE APRIL 30, 2011	1287 HEBRON RD. HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427
	ify the Income Tax Bureau promptly of any change in ownership or name RM WH-M	and address shown above.	If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.
	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TA	X WITHHELD DO NOT ROUND	AMENDED RETURN WITH PAYMEN
	Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax		I hereby certify that the information and statements contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES		(Signed)
	ls this a final return? ☐ YES ☐ NO 1 If yes, attach explanation	. \$	(Official Title) Date
	Actual Tax Withheld in month/quarter for City	. \$	Federal ID no.
•	Income Tax 1.50%25% Both		
š.	Adjustment of Tax for prior quarter (see instructions)	. \$	Phone no.
	Penalty (5% per month – max 100%) 4		THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
j.	Interest (1.5% per month) 5		
ò.	Total – (Lines 2-5)		MAKE CHECK OR MONEY ORDER PAYABLE TO CITY OF HEATH
IAN	ME AND ADDRESS	FOR THE PERIOD ENDING APRIL 30, 2011	MAIL TO: INCOME TAX BUREAU CITY OF HEATH
		DUE ON OR BEFORE MAY 31, 2011	1287 HEBRON RD. HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427

If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.

CI.	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TA	X WITHHE	LD \square AM	MENDED RETURN WITH PAYMEN
1.	Taxable Earnings paid all Employees subject	DO NO	T ROUND	I hereby certify that the information and statements
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax			contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO 1	. \$		(Signed)
	If yes, attach explanation	*		(Official Title) Date
2.	Actual Tax Withheld in month/quarter for City	. \$		Federal ID no.
_	Income Tax 1.50%25% Both			Phone no
3.	Adjustment of Tax for prior quarter (see instructions)			THIS RETURN MUST BE FILED ON OR
4.	Penalty (5% per month – max 100%)			BEFORE THE DUE DATE SHOWN BELOW
5.	Interest (1.5% per month)5			MAKE CHECK OR MONEY ORDER PAYABLE TO
6.	Total – (Lines 2-5)	5. \$		CITY OF HEATH
NAM	/IE AND ADDRESS	FOR THE PERMAY 31, 201		MAIL TO: INCOME TAX BUREAU CITY OF HEATH 1287 HEBRON RD. HEATH, OHIO 43056-1096
		JUNE 30, 20 ⁻	11	TELEPHONE (740) 522-3427
Not	ify the Income Tax Bureau promptly of any change in ownership or name	and address sl	hown above.	If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.
	RM WH-M			and enclose sen-addressed, stamped envelope.
CI.	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TA	X WITHHE	LD AM	TENDED RETURN WITH PAYMEN
1.	Taxable Earnings paid all Employees subject	DO NO	T ROUND	I hereby certify that the information and statements
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax			contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO 1	. \$		(Signed)
	If yes, attach explanation	. 4		(Official Title) Date
2.	Actual Tax Withheld in month/quarter for City	. \$		Federal ID no.
	Income Tax 1.50%25% Both			Phone no
3.	Adjustment of Tax for prior quarter (see instructions)			THIS RETURN MUST BE FILED ON OR
4.	Penalty (5% per month – max 100%) 4			BEFORE THE DUE DATE SHOWN BELOW
5.	Interest (1.5% per month) 5			MAKE CHECK OR MONEY ORDER PAYABLE TO
6.	Total – (Lines 2-5)	5. \$		CITY OF HEATH
NAN	ME AND ADDRESS	FOR THE PER JUNE 30, 20	RIOD ENDING 11	MAIL TO: INCOME TAX BUREAU CITY OF HEATH
		DUE ON OR JULY 31, 201		1287 HEBRON RD. HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427
				If receipt is desired, submit additional copy
	ify the Income Tax Bureau promptly of any change in ownership or name	and address sl	nown above.	and enclose self-addressed, stamped envelope.
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OI.	EV OF HEATH OHIO FAADI OVEDS DETHING OF TA	V W/ITI II IE	"D	
	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TA			IENDED RETURN WITH PAYMEN
1.	Taxable Earnings paid all Employees subject	DO NO.	T ROUND	I hereby certify that the information and statements
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding? ☐ YES			contained herein are true and correct.
	Is this a courtesy withholding?	. \$		(Signed)
	If yes, attach explanation	*		(Official Title) Date
2.	Actual Tax Withheld in month/quarter for City	. \$		Federal ID no.
_	Income Tax 1.50%25% Both			Phone no
3.	Adjustment of Tax for prior quarter (see instructions)			THIS RETURN MUST BE FILED ON OR
4.	Penalty (5% per month – max 100%) 4			BEFORE THE DUE DATE SHOWN BELOW
5.	Interest (1.5% per month) 5			MAKE CHECK OR MONEY ORDER PAYABLE TO
6.	Total – (Lines 2-5)	5. \$		CITY OF HEATH
NAN	ME AND ADDRESS	FOR THE PER JULY 31, 201	RIOD ENDING I 1	MAIL TO: INCOME TAX BUREAU CITY OF HEATH
		DUE ON OR I		1287 HEBRON RD. HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427

Notify the Income Tax Bureau promptly of any change in ownership or name and address shown above.

FORM WH-M

If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.

CI.	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TAX	X WITHHELD	AMENDED RETURN WITH PAYMEN
1.	Taxable Earnings paid all Employees subject	DO NOT ROUND	I hereby certify that the information and statements
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax		contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO 1.	. \$	(Signed)
	If yes, attach explanation	. •	(Official Title) Date
2.	Actual Tax Withheld in month/quarter for City 2.	. \$	Federal ID no.
	Income Tax 1.50%25% Both		Phone no
3.	Adjustment of Tax for prior quarter (see instructions) 3.		THIS RETURN MUST BE FILED ON OR
١.	Penalty (5% per month – max 100%) 4.		BEFORE THE DUE DATE SHOWN BELOW
).	Interest (1.5% per month) 5.	· •	MAKE CHECK OR MONEY ORDER PAYABLE TO
	Total – (Lines 2-5)	. \$	CITY OF HEATH
IAN	/IE AND ADDRESS	FOR THE PERIOD ENDIN AUGUST 31, 2011 DUE ON OR BEFORE	CITY OF HEATH 1287 HEBRON RD.
		SEPTEMBER 30, 2011	HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427
	ify the Income Tax Bureau promptly of any change in ownership or name a	and address shown above	If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.
Or	IM VAL-IM		
) <u> </u>	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TAX	X WITHHELD	AMENDED RETURN WITH PAYMEN
	Taxable Earnings paid all Employees subject	DO NOT ROUND	I hereby certify that the information and statements
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax		contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO 1.	. \$	(Signed)
	If yes, attach explanation	.	(Official Title) Date
	Actual Tax Withheld in month/quarter for City	. \$	Federal ID no
	Income Tax 1.50%25% Both		Phone no.
	Adjustment of Tax for prior quarter (see instructions)		THIS RETURN MUST BE FILED ON OR
	Penalty (5% per month – max 100%) 4.		BEFORE THE DUE DATE SHOWN BELOW
	Interest (1.5% per month) 5.		MAKE CHECK OR MONEY ORDER PAYABLE TO
	Total – (Lines 2-5)	. \$	CITY OF HEATH
ΑN	ME AND ADDRESS	FOR THE PERIOD ENDIN SEPTEMBER 30, 2011	MAIL TO: INCOME TAX BUREAU CITY OF HEATH
		DUE ON OR BEFORE	1287 HEBRON RD.
		OCTOBER 31, 2011	HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427
			If receipt is desired, submit additional copy
	ify the Income Tax Bureau promptly of any change in ownership or name a	and address shown above	and enclose self-addressed, stamped envelope.
Or	IIAI AALI-IAI		
)I	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF TAX	X WITHHELD	AMENDED RETURN WITH PAYMEN
	Taxable Earnings paid all Employees subject	DO NOT ROUND	I hereby certify that the information and statements
	to City of HEATH, Ohio, 1.50% (.0150) Income Tax		contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES		(Signed)
	Is this a final return? ☐ YES ☐ NO 1. If yes, attach explanation	. \$	(Official Title) Date
	Actual Tax Withheld in month/quarter for City	. \$	Federal ID no.
•	Income Tax 1.50%25% Both	Ψ	Phone no
	Adjustment of Tax for prior quarter (see instructions) 3.	. \$	
	Penalty (5% per month – max 100%) 4.	. \$	THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
	Interest (1.5% per month) 5.		MAKE CHECK OR MONEY ORDER PAYABLE TO
	Total – (Lines 2-5)	. \$	CITY OF HEATH
	AF AND ADDRESS		MAIL TO:
Αľ	/IE AND ADDRESS	FOR THE PERIOD ENDIN OCTOBER 31, 2011	INCOME TAX BUREAU CITY OF HEATH
			1287 HEBRON RD.
		DUE ON OR BEFORE NOVEMBER 30, 2011	HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427

If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope.

1.	Taxable Earnings paid all Employees subject		DO NOT ROUND	I hereby certify that the information and statements
٠.	to City of HEATH, Ohio, 1.50% (.0150) Income Tax			contained herein are true and correct.
	Is this a courtesy withholding? ☐ YES Is this a final return? ☐ YES ☐ NO	1	\$	(Signed)
	If yes, attach explanation	١.	Ψ	(Official Title) Date
2.	Actual Tax Withheld in month/quarter for City	2.	\$	Federal ID no.
3.	Adjustment of Tax for prior quarter (see instructions)	3.	\$	Phone no
4.	Penalty (5% per month – max 100%)		\$	THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
5.	Interest (1.5% per month)		\$	
6.	Total – (Lines 2-5)		\$	MAKE CHECK OR MONEY ORDER PAYABLE TO CITY OF HEATH
NAI	ME AND ADDRESS		FOR THE PERIOD ENDING NOVEMBER 30, 2011 DUE ON OR BEFORE DECEMBER 31, 2011	MAIL TO: INCOME TAX BUREAU CITY OF HEATH 1287 HEBRON RD. HEATH, OHIO 43056-1096 TELEPHONE (740) 522-3427
	ify the Income Tax Bureau promptly of any change in ownership or nam RM WH-M	ne a	nd address shown above.	If receipt is desired, submit additional copy and enclose self-addressed, stamped envelope
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CI	rм wh-м ГҮ OF HEATH, OHIO, EMPLOYER'S RETURN OF T			and enclose self-addressed, stamped enveloped
FOI	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF T Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax		(WITHHELD - AM	and enclose self-addressed, stamped envelope
CI	Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	ΈΑΧ	(WITHHELD ☐ AN DO NOT ROUND	and enclose self-addressed, stamped enveloped and enclose self-addressed self-addre
CI	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF T Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax	ΈΑΧ	(WITHHELD ☐ AN DO NOT ROUND	and enclose self-addressed, stamped enveloped MENDED RETURN WITH PAYME I hereby certify that the information and statements contained herein are true and correct.
CI	Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	ΓΑΧ	C WITHHELD	and enclose self-addressed, stamped enveloped MENDED RETURN WITH PAYME I hereby certify that the information and statements contained herein are true and correct. (Signed)
Cl' 1.	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF T Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	1. 2.	C WITHHELD	and enclose self-addressed, stamped enveloped MENDED RETURN WITH PAYME I hereby certify that the information and statements contained herein are true and correct. (Signed) (Official Title) Date
Cl' 1. 2. 3.	TY OF HEATH, OHIO, EMPLOYER'S RETURN OF T Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	1. 2. 3.	CWITHHELD	and enclose self-addressed, stamped enveloped MENDED RETURN WITH PAYME I hereby certify that the information and statements contained herein are true and correct. (Signed) (Official Title) Date Federal ID no.
Cl' 1. 2. 3. 4.	Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	1. 2. 3. 4.	S WITHHELD AM DO NOT ROUND \$ \$ \$ \$ \$	and enclose self-addressed, stamped enveloped MENDED RETURN WITH PAYME I hereby certify that the information and statements contained herein are true and correct. (Signed) (Official Title) Federal ID no. Phone no.
Cl' 1. 2. 3. 4. 5.	Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	1. 2. 3. 4. 5.	C WITHHELD	and enclose self-addressed, stamped enveloped MENDED RETURN WITH PAYME I hereby certify that the information and statements contained herein are true and correct. (Signed) (Official Title) Date Federal ID no. Phone no. THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW MAKE CHECK OR MONEY ORDER PAYABLE TO
Cl' 1. 2. 3. 4.	Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	1. 2. 3. 4. 5.	S WITHHELD AM DO NOT ROUND \$ \$ \$ \$ \$	and enclose self-addressed, stamped enveloped I hereby certify that the information and statements contained herein are true and correct. (Signed) (Official Title) Pederal ID no. Phone no. THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW
2. 3. 4. 5. 6.	Taxable Earnings paid all Employees subject to City of HEATH, Ohio, 1.50% (.0150) Income Tax Is this a courtesy withholding?	1. 2. 3. 4. 5.	C WITHHELD	and enclose self-addressed, stamped enveloped MENDED RETURN WITH PAYME I hereby certify that the information and statements contained herein are true and correct. (Signed) (Official Title) Date Federal ID no. Phone no. THIS RETURN MUST BE FILED ON OR BEFORE THE DUE DATE SHOWN BELOW MAKE CHECK OR MONEY ORDER PAYABLE TO

Notify the Income Tax Bureau promptly of any change in ownership or name and address shown above. FORM WH-M

CITY OF HEATH, OHIO, EMPLOYER'S RETURN OF TAX WITHHELD

SPECIFIC FILING INFORMATION

☐ AMENDED

RETURN WITH PAYMENT

On or before the last day of February of each year, each employer must file a withholding reconciliation on the City of Heath Form WH-R. Copies of all W-2 forms applicable to the reconciliation must be attached. All W-2's must furnish the name, address, social security number, gross wages, city tax withheld, name of city for which tax was withheld, and any other compensation paid to the individual. If copies of the W-2 forms are not available, each employer must provide a listing of all employees subject to Heath tax. The listing shall require the same type of information as is required of the W-2 form.

GENERAL INFORMATION

Any individual (s) or business entity compensating individuals on a commission or contract labor basis must furnish copies of the 1099 or appropriate earning statement on or before the last day of February of each year. All 1099's or earning statements shall require the same type of information as is required of the W-2 forms as stated above.

The front of the Form WH-R must show a breakdown of all withholding payments made either quarterly or monthly in the boxes provided. Sections 1,2,3,4, and 5 must be completed. The total tax paid should be equal to 1.50% (or the reduced courtesy withholding rate) of box 1. The completed Form WH-R and all attachments must be submitted to the Heath Income Tax Bureau, City of Heath, 1287 Hebron Rd., Heath, Ohio 43056-1096 on or before February 28 of each year. Failure to file Form WH-R with attachments by February 28 each year will result in a penalty of \$25. Any questions in completing the Form WH-R should be referred to the Income Tax Bureau at (740) 522-3427.

If receipt is desired, submit additional copy

and enclose self-addressed, stamped envelope.

CITY OF HEATH ANNUAL RECONCILIATION SUBMIT BY FEBRUARY 28, 2012. W-2'S MUST BE ATTACHED	JANUARY	JULY	ALL SECTIONS MUST BE COMPLETED
MAIL TO: INCOME TAX BUREAU	FEBRUARY	AUGUST	1. TOTAL HEATH W-2'S #
CITY OF HEATH 1287 HEBRON RD.	MARCH	SEPTEMBER	HEATH WAGES SUBJECT TO WITHHOLDING TAX \$
HEATH, OHIO 43056-1096 PHONE: (740) 522-3427	1ST QUARTER	3RD QUARTER	3. AMOUNT OF HEATH TAX WITHHELD \$
FOR TAX YEAR ENDING:	APRIL	OCTOBER	4. ADJUSTMENT WITH THIS RETURN \$
PAYMENT ENCLOSED	MAY	NOVEMBER	5. TOTAL HEATH TAX PAID \$
REFUND REQUESTED	JUNE	DECEMBER	
NAME:	2ND QUARTER	4TH QUARTER	
	I hereby certify that t	the information and sta	tements contained herein are true and correc
	Signed		Title
	Federal ID no		Date
FORM WH-R	Phone no		

WITHHOLDING TAX WORKSHEET

(Keep for your records - Do not file)

Month Ending	Due Date	Check #	Date	Amount	Month Ending	Due Date	Check #	Date	Amount
1/31	2/28				7/31	8/31			
2/29	3/31				8/31	9/30			
3/31	4/30				9/30	10/31			
4/30	5/31				10/31	11/30			
5/31	6/30				11/30	12/31			
6/30	7/31				12/31	1/31			

WITHHOLDING TAX WORKSHEET (Keep for your records - Do not file)